

RECEIVED

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FEC-MAIL CENTER

FEC  
FORM 3XREPORT OF RECEIPTS  
AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Anesthesia Service Medical Group Good Gov't Fund - Federal

ADDRESS (number and street)

7185 Navajo Road, Suite P

Check if different  
than previously  
reported. (ACC)

San Diego

CA

92119

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00216184

3. IS THIS REPORT NEW OR AMENDED  
(N) (X) (A)

4. TYPE OF REPORT  
(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)  
July 15  
Quarterly Report(Q2)  
X October 15  
Quarterly Report(Q3)  
January 31  
Quarterly Report(YE)  
July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)  
Termination Report  
(TER)

(b) Monthly  
Report  
Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12G)

Election on

in the  
State of(d) 30-Day  
Post-Election  
Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the  
State of

5. Covering Period 07 01 2010 through 09 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer C. April Boling, CPA

Signature of Treasurer

Date 02 18 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
OnlyFEC FORM 3X  
(Rev. 12/2004)

FE8AN026

11030574901

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Anesthesia Service Medical Group Good Gov't Fund - Federal

Report Covering the Period:

From:

MM  
07

DD  
01

Y Y W W  
2010

To:

MM  
09

DD  
30

Y Y W W  
2010

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2010		15216.26
(b) Cash on Hand at Beginning of Reporting Period .....	8274.06	
(c) Total Receipts (from Line 19) .....	5970.00	15025.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	14244.06	30241.26
7. Total Disbursements (from Line 31) .....	10746.11	26743.31
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	3497.95	3497.95
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

11030574902

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Anesthesia Service Medical Group Good Gov't Fund - Federal

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2110.00	3010.00
(i) Itemized (use Schedule A) .....	3860.00	12015.00
(ii) Unitemized .....		
(iii) TOTAL (add Lines 11(a)(i) and (ii)) .....	5970.00	15025.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) .....	5970.00	15025.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)) .....	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	5970.00	15025.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5970.00	15025.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

## **II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1346.11	2093.31
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	1346.11	2093.31
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9400.00	24650.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(e), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	10746.11	26743.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10746.11	26743.31

11030574904

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	5970.00	15025.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5970.00	15025.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1346.11	2093.31
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1346.11	2093.31

FE6AN026

11030574905

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Anesthesia Service Medical Group Good Gov't Fund - Federal

A.

Full Name (Last, First, Middle Initial)

Marvin Benson

Mailing Address 13890 Crest Way

City

State

Zip Code

Del Mar

CA

92014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010

☐ Primary ☐ General

☒ Other (specify) ☐  
Calendar Year

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2010

Transaction ID: 11AI-22897-IP

Amount of Each Receipt this Period

110.00

Payroll Deduction (\$55 Monthly)

B.

Full Name (Last, First, Middle Initial)

Terrance Breen

Mailing Address 5503 Rutgers Rd

City

State

Zip Code

La Jolla

CA

92037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010

☐ Primary ☐ General

☒ Other (specify) ☐  
Calendar Year

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2010

Transaction ID: 11AI-22982-IP

Amount of Each Receipt this Period

200.00

Payroll Deduction (\$100 Monthly)

C.

Full Name (Last, First, Middle Initial)

Robert Brucker

Mailing Address 3253 Lahitte Court

City

State

Zip Code

San Diego

CA

92122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010

☐ Primary ☐ General

☒ Other (specify) ☐  
Calendar Year

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2010

Transaction ID: 11AI-22899-IP

Amount of Each Receipt this Period

100.00

Payroll Deduction (\$50 Monthly)

SUBTOTAL of Receipts This Page (optional)

410.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:		PAGE 7 / 14	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full):

Anesthesia Service Medical Group Good Gov't Fund - Federal

A.

Full Name (Last, First, Middle Initial)

Michael Danielson

Mailing Address 500 W. Harbor Drive, Suite 1102

City

San Diego

State

CA

Zip Code

92101

FEC ID number of contributing federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ☐  
Calendar Year

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

09 / 30 / 2010

Transaction ID: 11AI-22986-IP

Amount of Each Receipt this Period

100.00

Payroll Deduction (\$50 Monthly)

B.

Full Name (Last, First, Middle Initial)

Daniel DeRoo

Mailing Address 12649 Sagecrest Drive

City

Poway

State

CA

Zip Code

92064

FEC ID number of contributing federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ☐  
Calendar Year

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

09 / 30 / 2010

Transaction ID: 11AI-22902-IP

Amount of Each Receipt this Period

100.00

Payroll Deduction (\$50 Monthly)

C.

Full Name (Last, First, Middle Initial)

Kent Diveley

Mailing Address 6537 Wandemere Drive

City

San Diego

State

CA

Zip Code

92120

FEC ID number of contributing federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ☐  
Calendar Year

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

09 / 30 / 2010

Transaction ID: 11AI-22903-IP

Amount of Each Receipt this Period

100.00

Payroll Deduction (\$50 Monthly)

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

11030574907

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Anesthesia Service Medical Group Good Gov't Fund - Federal

A.

Full Name (Last, First, Middle Initial)

Brandon Giap

Mailing Address 6715 Rancho Toyon Place

City

San Diego

State

CA

Zip Code

92130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010

☐ Primary ☐ General

☒ Other (specify) ☐  
Calendar Year

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2010

Transaction ID: 11AI-22988-IP

Amount of Each Receipt this Period

200.00

Payroll Deduction (\$100  
Monthly)

B.

Full Name (Last, First, Middle Initial)

Claudia Herd

Mailing Address 16723 Circa Del Norte

City

Rancho Santa Fe

State

CA

Zip Code

92067

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010

☐ Primary ☐ General

☒ Other (specify) ☐  
Calendar Year

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2010

Transaction ID: 11AI-22941-IP

Amount of Each Receipt this Period

100.00

Payroll Deduction (\$50 Mo-  
nthly)

C.

Full Name (Last, First, Middle Initial)

Garth Huston

Mailing Address 407 Shore View Ln

City

Leucadia

State

CA

Zip Code

92024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010

☐ Primary ☐ General

☒ Other (specify) ☐  
Calendar Year

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2010

Transaction ID: 11AI-22911-IP

Amount of Each Receipt this Period

100.00

Payroll Deduction (\$50 Mo-  
nthly)

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Anesthesia Service Medical Group Good Gov't Fund - Federal

A.

Full Name (Last, First, Middle Initial)

Dandy Lee

Mailing Address 701 Midori Ct.

City

Solana Beach

State

CA

Zip Code

92075

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010

Primary General

☒ Other (specify) ☐  
Calendar Year

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 08 / 2010

Transaction ID: 11AI-22966-IP

Amount of Each Receipt this Period

100.00

Payroll Deduction (\$50 Monthly)

B.

Full Name (Last, First, Middle Initial)

Alex Pue

Mailing Address 3652 Carleton Street

City

San Diego

State

CA

Zip Code

92106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010

Primary General

☒ Other (specify) ☐  
Calendar Year

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2010

Transaction ID: 11AI-22957-IP

Amount of Each Receipt this Period

100.00

Payroll Deduction (\$50 Monthly)

C.

Full Name (Last, First, Middle Initial)

Mark S. Ransom

Mailing Address 859 Morning Sun Drive

City

Encinitas

State

CA

Zip Code

92024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010

Primary General

☒ Other (specify) ☐  
Calendar Year

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2010

Transaction ID: 11AI-22959-IP

Amount of Each Receipt this Period

200.00

Payroll Deduction (\$100 Monthly)

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 14

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Anesthesia Service Medical Group Good Gov't Fund - Federal

A.

Full Name (Last, First, Middle Initial)

Peter Raudaskoski

Mailing Address 11256 Sherrard Way

City

San Diego

State

CA

Zip Code

92131

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ☐  
Calendar Year

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2010

Transaction ID: 11AI-22917-IP

Amount of Each Receipt this Period

100.00

Payroll Deduction (\$50 Monthly)

B.

Full Name (Last, First, Middle Initial)

Stephen Rogers

Mailing Address 1340 Opal Street

City

San Diego

State

CA

Zip Code

92109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ☐  
Calendar Year

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2010

Transaction ID: 11AI-22918-IP

Amount of Each Receipt this Period

100.00

Payroll Deduction (\$50 Monthly)

C.

Full Name (Last, First, Middle Initial)

Steven A. Saltz

Mailing Address 2757 Inverness Dr.

City

Carlsbad

State

CA

Zip Code

92008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010

☐ Primary ☐ General  
☒ Other (specify) ☐  
Calendar Year

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2010

Transaction ID: 11AI-22960-IP

Amount of Each Receipt this Period

100.00

Payroll Deduction (\$50 Monthly)

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:		PAGE 11 / 14	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)

Anesthesia Service Medical Group Good Gov't Fund - Federal

A.

Full Name (Last, First, Middle initial)

Lei Wang

Mailing Address 11149 Corte Mar de Cristal

City

San Diego

State

CA

Zip Code

92130

FEC ID number of contributing federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010

Primary General

X Other (specify) ☐ Calendar Year

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2010

Transaction ID: 11AI-22994-IP

Amount of Each Receipt this Period

100.00

Payroll Deduction (\$50 Monthly)

B.

Full Name (Last, First, Middle Initial)

John Wright

Mailing Address 3063 Cranbrook Ct

City

La Jolla

State

CA

Zip Code

92037

FEC ID number of contributing federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010

Primary General

X Other (specify) ☐ Calendar Year

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2010

Transaction ID: 11AI-22925-IP

Amount of Each Receipt this Period

100.00

Payroll Deduction (\$50 Monthly)

C.

Full Name (Last, First, Middle Initial)

Roger Zeman

Mailing Address 3545 Front St

City

San Diego

State

CA

Zip Code

92103

FEC ID number of contributing federal political committee.

C

Name of Employer  
ASMG

Occupation  
Anesthesiologist

Receipt For: 2010

Primary General

X Other (specify) ☐ Calendar Year

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2010

Transaction ID: 11AI-22927-IP

Amount of Each Receipt this Period

100.00

Payroll Deduction (\$50 Monthly)

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

2110.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 14

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Anesthesia Service Medical Group Good Gov't Fund - Federal

A.

Full Name (Last, First, Middle Initial)

Atlantic Information Services

Mailing Address 1100 17th St NW Ste 300

City Washington State DC Zip Code 20036-4631

Purpose of Disbursement  
Subscription

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21B-707

Date of Disbursement

07 / 16 / 2010

Amount of Each Disbursement this Period

365.00

B.

Full Name (Last, First, Middle Initial)

C. April Boling, CPA

Mailing Address 7185 Navajo Rd Ste P

City San Diego State CA Zip Code 92119

Purpose of Disbursement  
Accounting

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21B-710

Date of Disbursement

08 / 13 / 2010

Amount of Each Disbursement this Period

282.11

C.

Full Name (Last, First, Middle Initial)

National Journal Group, Inc

Mailing Address P.O. Box 64408

City Baltimore State MD Zip Code 21298-8228

Purpose of Disbursement  
Subscription

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 21B-706

Date of Disbursement

07 / 16 / 2010

Amount of Each Disbursement this Period

699.00

SUBTOTAL of Disbursements This Page (optional) ►

1346.11

TOTAL This Period (last page this line number only) ►

1346.11

11030574912

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 14

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Anesthesia Service Medical Group Good Gov't Fund - Federal

A.

Full Name (Last, First, Middle initial)

Brian Bilbray for Congress

Transaction ID: 23-704

Date of Disbursement

07 / 16 / 2010

Mailing Address PO Box 455

City Rancho Santa Fe State CA Zip Code 92067

Amount of Each Disbursement this Period

2400.00

Purpose of Disbursement  
Political Contribution

011  
Category/  
Type

Candidate Name  
Brian Bilbray

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
Other (specify) ▼

State: CA District: 50

B.

Full Name (Last, First, Middle Initial)

Carly for California

Transaction ID: 23-705

Date of Disbursement

07 / 16 / 2010

Mailing Address PO Box 710187

City San Diego State CA Zip Code 92171

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement  
Political Contribution

011  
Category/  
Type

Candidate Name  
Carly Fiorina

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
Other (specify) ▼

State: CA District:

2010 PRIMARY DEBT RETIREMENT

C.

Full Name (Last, First, Middle Initial)

Carly for California

Transaction ID: 23-712

Date of Disbursement

08 / 16 / 2010

Mailing Address PO Box 710187

City San Diego State CA Zip Code 92171

Amount of Each Disbursement this Period

3000.00

Purpose of Disbursement  
Political Contribution

011  
Category/  
Type

Candidate Name  
Carly Fiorina

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
Other (specify) ▼

State: CA District:

SUBTOTAL of Disbursements This Page (optional) ►

6400.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Anesthesia Service Medical Group Good Gov't Fund - Federal

A.		Full Name (Last, First, Middle Initial) Lunghren for Congress	Transaction ID: 23-714 Date of Disbursement 09 / 13 / 2010
Mailing Address		1029 H Street, Suite 305	Amount of Each Disbursement this Period 1000.00
City	State	Zip Code	
Sacramento	CA	95814	
Purpose of Disbursement Political Contribution		011 Category/ Type	
Candidate Name Dan Lungreh			
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 03		
B.		Full Name (Last, First, Middle Initial) Price for Congress	Transaction ID: 23-713 Date of Disbursement 08 / 28 / 2010
Mailing Address		PO Box 425	Amount of Each Disbursement this Period 2000.00
City	State	Zip Code	
Roswell	GA	30077	
Purpose of Disbursement Political Contribution		011 Category/ Type	
Candidate Name Tom Price			
Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA	District: 06		

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

TOTAL This Period (last page this line number only) ▶

9400.00

Federal Election Commission  
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*En*

PREPARER

*2/22/11*

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